



# The Change Leader Program

## A P P L I C A T I O N

---

Name/position: \_\_\_\_\_

Years in this position \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/s: \_\_\_\_\_

Email: \_\_\_\_\_

In a few sentences, explain your reasons for applying to attend this training program:

---

---

---

---

---

---

---

---

---

My board has approved my participation in the Change Leader certification program:

Board Chair signature \_\_\_\_\_

Commitment Fee: I commit to full participation in the program. I understand that I will pay a minimal fee according to the annual income of my organization and if I attend or make-up all of the sessions and become certified 50% of that fee will be reimbursed to my organization.

Signature: \_\_\_\_\_

Participation fee covers all instruction, materials, lodging, most meals, snacks and any associated expenses for the entire course.

Fee: \_\_\_\_\_

- ☐ Invoice my organization for total amount
- ☐ Invoice my organization quarterly
- ☐ Full amount remittance upon application being approved

Fee Structure	
Org. annual income	Fee
\$0 --- \$15,000	\$200.00
\$15,000 -- \$50,000	\$300.00
\$50,000 -- \$100,000	\$500.00
Over \$100,000	\$600.00

Application received \_\_\_\_\_

Application approved \_\_\_\_\_

Letter of acceptance sent \_\_\_\_\_